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| <b>Issue Classification</b><br> | <b>Application/Control No.</b><br>09486723 | <b>Applicant(s)/Patent Under Reexamination</b><br>LAMLA ET AL. |
|   | <b>Examiner</b><br>PONNOREAY PICH          | <b>Art Unit</b><br>2435  |

| ORIGINAL           |                                   |          |    |  |  | INTERNATIONAL CLASSIFICATION |   |   |   |                     |             |  |  |  |  |  |  |  |
|--------------------|-----------------------------------|----------|----|--|--|------------------------------|---|---|---|---------------------|-------------|--|--|--|--|--|--|--|
| CLASS              |                                   | SUBCLASS |    |  |  | CLAIMED                      |   |   |   |                     | NON-CLAIMED |  |  |  |  |  |  |  |
| 380                |                                   | 33       |    |  |  | H                            | 0 | 4 | L | 9 / 32 (2006.0)     |             |  |  |  |  |  |  |  |
| CROSS REFERENCE(S) |                                   |          |    |  |  | G                            | 0 | 6 | F | 7 / 04 (2006.01.01) |             |  |  |  |  |  |  |  |
|                    |                                   |          |    |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
| CLASS              | SUBCLASS (ONE SUBCLASS PER BLOCK) |          |    |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
| 726                | 16                                | 17       | 20 |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
| 713                | 168                               |          |    |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |    |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |    |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |    |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |    |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |    |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |    |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |    |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |    |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |    |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |    |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |    |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |    |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |

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|---|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|
| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant <input type="checkbox"/> CPA <input type="checkbox"/> T.D. <input type="checkbox"/> R.1.47 |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| Final   | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
| 1   | 1        |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 2   | 2        |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 3   | 3        |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 4   | 4        |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 5   | 5        |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 6   | 6        |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 7   | 7        |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 9   | 8        |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 10  | 9        |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 11  | 10       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 8   | 11       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 12  | 12       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 13  | 13       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 14  | 14       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|   |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|   |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |

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| NONE   |         | <b>Total Claims Allowed:</b> |                   |
|  |         | 14                           |                   |
| (Assistant Examiner)                               | (Date)  |                              |                   |
| /PONNOREAY PICH/<br>Primary Examiner.Art Unit 2435 | 9/11/09 | O.G. Print Claim(s)          | O.G. Print Figure |
| (Primary Examiner)                                 | (Date)  | 1                            | 1                 |